



Department of Medical Assistance Services
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Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: Providers of Case Management Services under the Individual and Family Developmental Disabilities Support (DD) Waiver

FROM: Cynthia B. Jones, Director
Department of Medical Assistance Services (DMAS)

MEMO: Special

DATE: May 20, 2014

SUBJECT: DD Case Management Training and Data Collection — *Effective June 1, 2014*

The purpose of this memorandum is to notify all DD Waiver Case Managers and Case Management agencies of a mandatory training requirement and participation in data collection per the Settlement Agreement with the U.S. Department of Justice.

DD Waiver Data Collection

Pursuant to 12VAC30-50-490 E (1) (b) and 12VAC30-120-720 (E), the DD Waiver Case Manager is required to keep and maintain documentation to include face-to-face visits, type, number, & frequency of case management visits and all other documentation pertaining to the plan of care and all supporting documentation. The *HCBS Case Management for DD Waiver Participation Agreement* states that Case Managers must keep necessary records and will furnish and give access to all data deemed necessary and pertinent.

In February 2012 the Commonwealth of Virginia signed a Settlement Agreement with the U.S. Department of Justice (DOJ) requiring data to be collected and furnished to the appointed Court Monitor. DBHDS is the agency responsible to provide all data to the Court Monitor pursuant to the Settlement Agreement. All Case Managers and Case Management agencies will be required to furnish, upon request by DBHDS or DMAS, all data that is deemed necessary in order to comply with the Settlement Agreement and all other data requirements from other entities such as the Centers for Medicare & Medicaid Services (CMS).

In the next few weeks and regularly thereafter, DBHDS will be requesting data for this purpose and all DD Case Managers are required to comply in a timely fashion. Failure to comply with either the training or data collection requirement as outlined in this memorandum may result in additional action up to and including suspension or termination of the *Case Management for DD Waiver Participation Agreement*.

DD Waiver Case Manager Training

DMAS has amended the administrative policy for DD Waiver Case Managers, pursuant to item #8 in the DD Waiver Participation Agreement and 12VAC30-50-490 E (2), to require that all current DD Waiver Case Managers complete the Department of Behavioral Health and Developmental Services (DBHDS) "Basics of Case Management Training Curriculum" within 30 days from the effective date of this memorandum. The training curriculum can be accessed through the DBHDS Knowledge Center and consists of the following 7 modules: (1) Overview (2) Disabilities Defined and Integration of Health Care (3) Building and Maintaining Relationships (4) Assessment (5) Planning (6) Services (7) Accountability. The "Basics of Case Management Training Curriculum" is mandatory for all current DD Waiver Case Managers. Newly hired DD Waiver Case Managers must complete this training within 30 days of hire. The following is the procedure to be used to access and complete this mandatory training:

- 1) Go to <https://covkc.virginia.gov/dbhds/external> with your internet browser.
- 2) Log-in – if you do not have a current log-in name & password you will have to register with the site.
- 3) Once you are registered and have logged in click “Learning Center” in the blue bar near the top of the page.
- 4) Then click on “Course Catalog.”
- 5) In the search bar type “CM,” then click the search button.
- 6) All of the case management modules will appear and you should take them in sequential order.

Assistance

Providers with questions about the DBHDS Knowledge Center please contact Jamie Jones jamie.jones@dbhds.virginia.gov. For general assistance with all other DD Waiver issues please contact the DD Waiver Helpline at 804-663-7290.

MANAGED CARE ORGANIZATIONS

Many Medicaid recipients are enrolled with one of the Department’s contracted Managed Care Organizations (MCO). In order to be reimbursed for services provided to an MCO enrolled individual, providers must follow their respective contract with the MCO. The MCO may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the MCO directly. Additional information about the Medicaid MCO program can be found at http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx.

COMMONWEALTH COORDINATED CARE

Commonwealth Coordinated Care (CCC) is a new initiative to coordinate care for individuals who are currently served by both Medicare and Medicaid and meet certain eligibility requirements. Please visit the website at http://www.dmas.virginia.gov/Content_pgs/alte-home.aspx to learn more.

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Xerox State Healthcare Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access service authorization information including status via KEPRO’s Provider Portal at <http://dmas.kepro.com>.

“HELPLINE”

The “HELPLINE” is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The “HELPLINE” numbers are:

- 1-804-786-6273 Richmond area and out-of-state long distance
- 1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the “HELPLINE” is for provider use only. Please have your Medicaid Provider Identification Number available when you call.